

University of Calgary Graduate Students' Association 1030 ES, 844 Campus Place NW Calgary Alberta T2N 1N4 403.220.5997 www.gsa.ucalgary.ca

APPLICATION FORM Graduate Students' Association Bursary (GSA Bursary)

Fall Intake Period: October 15 – 29, 2018
Fall Intake Deadline: Monday, October 29, 2018 4:00 PM MT

Winter Intake Period: January 1 – 14, 2019
Winter Intake Deadline: Monday, January 14, 2019 4:00 PM MT

Submit applications online
Applications received outside of the intake period will NOT be evaluated.

Late or incomplete applications will NOT be evaluated.

Questions regarding this application should be directed to: Awards Committee Chair of the Graduate Students' Association (GSA) at awards.gsa@ucalgary.ca

This information is collected following the standards set by the Personal Information and Privacy Act (PIPA). It is required to determine your eligibility for the bursary and may be used for research and statistical analysis. If you have any questions about the collection or use of this information, please contact the GSA's Awards Committee Chair at awards.gsa@ucalgary.ca

We understand and respect that asking for financial help can be difficult. Personal information provided in applications is kept confidential, and only disclosed for processing payment.

Submission guidelines and other critical information are provided in the Terms of Reference document found on the GSA's Bursary webpage.

A. Applicant's Information			
Surname(s):	Given name(s):		
UCalgary ID (UCID) #:	Faculty:		
Department:	Degree:		
Phone number:	Email address:		
Marital Status: Single Married Common L	aw Seperated Divorced Widowed		
If married or common law, does your spouse live or re	eside with you? Yes No		
If married or common law, what is your spouse's nam	e?		
How many dependents reside with you?			

1. Are you eligible to work in Canada? Yes	No
If yes, do you currently have a job? Yes	No
If yes, what is your rate of pay (\$ per hour)?	
If yes, how many hours a week do you work?	
2. If married or common law, is your spouse eligible to	work in Canada? Yes No
If yes, do they currently have a job? Yes	No
If yes, what is their rate of pay (\$ per hour)?	
If yes, how many hours a week do they work?	
3. Please fill out the following table regarding your est 2019). Earnings should be given after tax deduction. A	
Resources	Amount (CAD\$)
Income from job/work	\$
Fellowships/Studentships/Scholarships	\$
Assistantships	\$
Family support	\$
Savings	\$
Loans	\$
Visa differential reimbursement	\$
Spousal earnings	\$
Other (please list below)	\$
	\$
	\$
	\$
	\$
	\$
Total Resources (September 2018-August 2019)	\$

B. Applicant's Financial Resources

C. Applicant's Expenses

Annual Living Allowance: Please select one of the following for annual living allowance. This amount is based on the Alberta Government Alberta Student Aid Living Cost. This amount includes accommodations (rent/mortgage), utilities, food, transportation, health care and personal expenses.

Single, no dependents, not paying rent	\$6,624
Single, no dependents, paying rent or mortgage	\$13,836
Married/Common Law, no dependents, paying rent or mortgage	\$26,664
Single, one dependent, paying rent or mortgage	\$24,432
Married/Common Law, one dependent, paying rent or mortgage	\$33,936

^{*} For each additional dependent, ADD \$7,272 to the above amounts

1. Please fill out the following table regarding your estimated ANNUAL expenses (September 2018-August 2019). Attach additional pages if necessary.

Expenses	Amount (CAD\$)	
Living Allowance	\$	
(Includes accommodations, utilities, food, transportation, health care and personal expenses)		
Childcare	\$	
(Maximum per dependent under 12 is \$14,400)	D	
Tuition & Fees	\$	
Books	\$	
	1*	
Other (please list below)	e included in the living allowance, including	
(cannot include itemized expenses of things that should be included in the living allowance, including rent/mortgage, food, transportation/car payments, health care costs, and personal expenses)		
Total Total Total Control of the Con	\$	
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	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total Expenses (September 2018-August 2019)	\$	
Total Resources minus Total Expenses	\$	
Total dollar amount requested (to a maximum of \$1,500)	\$	

^{*} For each dependent under the age of 12, you may add up to \$14,400 daycare/childcare costs.

D. Other Sources of Assistance

Indicate if you or your spouse has applied to and/or received other sources of financial assistance. You are encouraged to apply for as many of these as you are eligible for and exhaust all options before applying for the GSA Bursary.

Individuals and their spouses are not eligible to receive a GSA Bursary if they have previously received an GSA Bursary or GSA Emergency Bursary in this academic year (September 2018-August 2019).

GSA Funding			
GSA Emergency Bursary			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
GSA Bursary (formerly GSA Inc	dividual and Family Bursary)		
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date: (
Campus Resources			
Campus Food Bank			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date: (
UCalgary, Office of the Registra	ar, Emergency Loans and Assist	ance	
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date: (
Provincial Resources			
Alberta Human Services—Fina	ncial Support (housing, medical	, etc.)	
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date: (-
Provincial Student Loans			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date: (_
National Resources			
Canadian Red Cross—Commu	nity Housing Support Program	_	
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Canadian Red Cross—Persona	al Disaster Assistance		
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:		

Other Resources

Bank Loans			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Line of credits			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Home Country Support			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Other - please indicate:			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Other - please indicate:			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		
Other - please indicate:			
Received	Applied & Did not receive	Eligible & Have not applied	Ineligible
(if received: Amount:	Date:)		

E. Personal Statements

Personal Statement is critical, as a standard form such as this one can only provide a partial description of a person's situation. Completion of each question is MANDATORY for the application to be considered complete. The evaluation committee places a large emphasis on the steps that you are taking to improve your situation. Please do not go over the visible space in the boxes. E1. Please describe your financial difficulties and how this impacts your/your family's lives.

Please answer the following questions with a description of your personal situation in the space provided. The

2.	To what extent, if any, are your financial difficulties unforeseeable or unavoidable?			
	3. What steps have you take so far to improve your financial situation?			
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	If you and/or your spouse are not employed, please explain why. (If employed, please write Not Applicable or state I/We are employed.)
5.	How will this bursary help resolve your financial difficulties?

F. Signatures

By signing this application, I confirm that:

- 1. I have answered all questions on this form that are applicable;
- 2. All information provided is true and complete;
- 3. I authorize the GSA to use the information provided on this application to determine my eligibility for the bursary and for research and statistical analysis, subject to the standards outlined by PIPA;
- 4. I authorize the GSA to share my information (full name, student ID) with the University of Calgary Human Resources and Payroll.

Applicant name (printed):	
Applicant signature:	
Date:	